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‘Khaki fever’ during the First World War: a historical analysis of social work’s approach towards young women, sex and moral danger

Abstract

When we read about social work history today, it is often through stories of the organisations (for example, the Charity Organisation Society, the Settlement Movement, Poor Law institutions) and the pioneers (Mary Richmond, Jane Addams, Octavia Hill, Eileen Younghusband to name only a few) who shaped the profession, making it the evidence-based, values-led, psycho-social profession of which we are proud to be a part today. But what was ‘social work’, and how has this changed over time? This article examines one particular aspect of social work history – moral welfare – by exploring the phenomenon of ‘khaki fever’, which appeared during the First World War and was centred on young women’s sexual risk-taking behaviour. It will be argued that the middle-class women who took to the streets to ‘police’ ‘khaki fever’ were, in effect, early social workers; their behaviour foreshadowed continuing (and current) concerns about young women, sex and moral danger. The article discusses this as an illustration of moral panic, and concludes that in revisiting social work’s past, we open up to scrutiny the classist, ageist and gendered assumptions that are at its core, as well as the familiar tensions around care and control within social work. (197)

Introduction

This article begins by acknowledging that social work history is best understood as ‘a dynamic weaving of a multiplicity of different strands of identity’ (Lorenz, 2007 p. 608). One such ‘strand of identity’ was the activity of the women who policed the streets of the UK and the United States during the years of the First World War, in response to the supposed risk to young women caught up in what was described at the time as the ‘epidemic’ of ‘khaki fever’. These middle-class women were, it will be

argued, engaged in an early form of social work; the focus of their concern was young working-class women's moral welfare, a prime target for social work intervention then and now. The article draws, in the main, on 'khaki fever' and its control in the UK, while noting that this was a phenomenon that also manifested itself in the US. It will be argued that 'khaki fever' is best understood as a moral panic; exploring this case-study example (Yin, 2009; Flyvbjerg, 2011) makes it possible to interrogate some of the classist, ageist and gendered ideas at the heart of social work, as well as the complex and contradictory discourses of care and control in the past and in the present day.

The analytical approach taken in the article draws on an understanding of history described by the philosopher Michel Foucault (1972) in *The Archaeology of Knowledge*. Here Foucault rejects conventional, evolutionary, linear methodologies, which present change in terms of continuity and transition; the notion that things are always getting better or getting worse; that a straight line can be drawn from one thing to the next. Instead, he suggests that we look for the moments when something changes – what he calls disruptions, repetitions and contradictions – and he suggests that at any one time, a mix of different ideas and practices (discourses) are likely to be pulling in different directions. He encourages historians to focus in on the specific, as he did in his study, *Discipline and Punish* (1977), with the expectation that through this, we will be able to achieve better understanding of this complexity. Using Foucault's advice, the article will interrogate the phenomenon of 'khaki fever' by posing the following key questions:

- What was it? Where did the discourse come from and why then?
- How did it play out in practice? (Who was 'speaking'? What was 'said' and 'not said'? What positions could the 'subjects' of the discourse adopt? How were the 'objects' defined?)

- What were the consequences, both positive and negative, for those involved and for society as a whole?

Other examples of this approach to history in social work can be found in Own Author (1995), Chambon (2011), Parton (1991) and McGregor (2014) and Skehill (2007).

‘Khaki fever’: what was it, where did it come from and why then?

The First World War was a time of great social, political and economic upheaval for men, women and children across Europe. For working-class young women in Britain, the war brought new freedoms and new opportunities, as increasing numbers of women engaged in work outside the home, in factories, mines and fields, and increasing numbers chose to serve overseas as nurses and drivers etc. Alongside this massive social change came renewed concern for the behaviour of young working-class women, and specifically the sexual behaviour of young working-class women.

In late 1914, soon after the outbreak of war, an epidemic of ‘khaki fever’ was said to have broken out across Britain: young women, excited by the presence of soldiers in their towns and cities, took to the streets in large numbers in the evenings and engaged in risky, dangerous behaviour, drinking alcohol, ‘running after’ men in uniform, and behaving immodestly (in other words, having sex in alley-ways and parks). Many of these women were said to be youths, between the ages of 13 and 16 years. (The age of sexual consent had been raised from 13 to 16 years of age thirty years earlier in the Criminal Law (Amendment) Act of 1885.) While some young women were described as prostitutes, most were not, and most were described, rather, as ‘respectable’ young women or ‘casual’ or ‘amateur’ prostitutes. This, of course, heightened the sense of public anxiety. A news story from *The Times* in 1917 exemplifies the tenor of the press-reporting of the day:

‘The most distressing feature of the evil as it exists here, however, is the number of quite young girls, between the ages of 15 and 18, who haunt the streets near the Australian Military Headquarters, and thrust themselves on men who, it must be confessed, are not always displeased by their attentions’.

The account continues:

‘Hundreds of these girls are to be seen about the district every night, and the arrival of a thousand men or more from time to time invariably brings them flocking towards the Horseferry road in even greater numbers.’ (p.6)

In reviewing this phenomenon, the historian Angela Woollacott (1994) points out that ‘khaki fever’ was, in reality, a short-lived affair, largely restricted to the early years of the war, although the above quotation from 1917 demonstrates that it did not disappear completely, and importantly, nor did concern about it. Woollacott argues that as time went on and the realities of war became better known, the excitement that had accompanied the outbreak of war dissipated. At the same time, women’s direct participation in the war effort increased, both in the form of war work at home (e.g. in munitions factories) and experiences abroad (as nurses and Voluntary Aid Detachment personnel). Thus young women found alternative avenues for their energies and their patriotism; they no longer needed to hang onto men’s uniforms to achieve this, and instead, increasingly had their own khaki uniforms to wear, whether working as munitions’ workers, in the Land Army, or the armed forces (the WAAC, the WRENS and the WRAF). This gave them prestige and the status of ‘active belligerents as women’ (Woollacott, 1994a p.333).

The UK was not the only place to experience ‘khaki fever’, however. Stories of ‘khaki fever’ also emerged across the United States soon after it entered the war in April 1917. Not only was there concern about the conduct of soldiers overseas at this time,

there was also widespread anxiety about the behaviour of girls at home. The term 'khaki fever' was used to describe the reportedly high incidence of casual premarital sex between young fighting men and female youth who were said to be 'smitten with men in uniform' (Appier 1998, p. 43).

How did it play out in practice?

There is another story to be told here, and that is the story of attempts to control and manage 'khaki fever'. As soon as it appeared in the UK, two separate groups of middle-class women laid claim to the right to deal with it: the National Union of Women Workers' (NUWW) Women Patrols' Committee and the Women Police Service.¹ Both organisations had connections with the suffrage movement, and both agreed that the existing, male-only police force was not appropriate to deal with this new social problem, since it was believed that only women, as rightful guardians of the morals of the nation, could take on such work. Beyond this, the organisations pulled in different directions and competed with one another for dominance.

NUWW Women Patrols

The NUWW was closely connected to the non-militant National Union of Women's Suffrage Societies (NUWSS). It had been established in 1876 as a social purity organisation to carry out rescue and reform work with young women. In a publicity pamphlet, the NUWW states that it was 'khaki fever' that prodded it into action and led to the development of women patrols:

'Who and what are Women Patrols?

'They are not detectives, neither are they rescue workers... but they are friends of the girls. Girls, who, over-excited by the abnormal conditions caused by the great war, flock to places where men in khaki are stationed... It is small wonder our lads and lasses throng the places where soldiers are collected. But it is clear these places are not where girls should spend their

leisure hours, and by so doing they run into grave moral danger' (Carden, 1916, p.1).

The language here is instructive. The NUWW was distancing itself from both the (male) police-force and from its 'rescue' roots. There were, in fact, a huge number of rescue organisations in operation at this time. For example, when the Charity Organisation Society conducted a survey of 'rescue work' in London in 1918, five organisations were found to be involved in policing women and girls in Piccadilly alone, and four more covered the Marylebone area.² In suggesting that the women patrols were 'friends of the girls', the NUWW pamphlet was making it clear that their work was prevention, not punishment or rescue; they wished to befriend girls and young women so that they might help them to make more positive use of their leisure time, keeping them on the 'straight and narrow' and preventing them from falling into 'moral danger'. The word 'friend' demonstrates that the NUWW workers had much in common with other preventive social workers of the day, including the 'police court missionaries' (early probation officers) (Mair and Burke, 2011) and 'friendly visitors' (Own author, 2008), who worked unpaid for a wide range of visiting societies. As Seed (1973) elaborates, this 'friendly' relationship was considered of greater value than practical assistance alone; it was 'part of a social mission to understand and to influence the social environment through personal intervention, in the spirit of not money, but yourselves' (p. 37).

The NUWW saw itself first and foremost a voluntary organisation, albeit with trained staff. This is an important distinction, since most of the voluntary organisations at this time saw themselves as fully professional, although their workers were unpaid, as befitted their view of what was acceptable women's work (Own author, 1995). The Women Patrols' Committee selected and trained a number of paid organisers, who then recruited and trained the volunteer workers; by October 1915, there were 2301

women patrols in 108 places across Britain and Ireland, including 20 in Scotland. The NUWW founded three Federated Training Schools, in Bristol (1916), Liverpool (1917) and Glasgow (1918); in addition, it seems reasonable to assume that some of its paid organisers might have undertaken one of the new courses of Social Studies and Training that were emerging in the UK universities. (For example, the University of Edinburgh's School of Social Studies and Training, established in 1918, provided training for a wide variety of social work professionals, including moral welfare workers and 'Organising Secretaries' of voluntary bodies.)

The women patrols always worked in pairs, not wearing uniform as such, but instead wearing dark coats and a recognisable arm-band. This was in line with the National Vigilance Association (NVA) and other social purity organisations, who felt that it was essential that they should distance themselves from other dubious characters who were accosting young women on the streets, including potential traffickers. As Own Author (1995) has argued, there was competition for the streets at this time; the line between what we might regard as policing and social work was far from clear. The routine activities of the women patrols involved patrolling streets and parks, cinemas, music and dance halls in the late afternoons and evenings, approaching young women thought to be at risk, and running youth groups for young women.

Women Police Service

Alongside the women patrols, a rival organisation was formed, with a similar approach but a very different *raison-d'être*. The Women Police Service (WPS), initially called the Women Police Volunteers (WPV), was established by a group of equal rights' feminists who sought to open up police-work to women. They were closely aligned to the militant Women's Social and Political Union (WSPU); some had been on hunger strike and now turned attention to getting careers for women in the police-force. Edith Smith from the WPS was the first paid policewoman in the UK.

She was invited by the local police in Grantham, Lincolnshire, to prevent sexual liaisons between women and troops when a large military camp was set up there; a further 148 WPS officers were subsequently taken on by local authorities, police forces and voluntary committees between 1915 and 1920 (Jackson, 2006).

The WPS officers wore uniform and were happy to be called 'police', but their work, like that of the women patrols, remained preventive; they had to call on male colleagues to make an arrest if this was required. In an interesting twist of fate, it was the Women Patrols that eventually won recognition from the Metropolitan Police Force to set up a women's service, not the Women Police Service.

Policing or social work?

Jackson (2006) estimates that there were over 6,000 women involved in policing activities during the First World War. Although the WPS and NUWW patrols were different bodies with different rationale, there were, in reality, strong links between the behaviour and activities of the two organisations. There were also strong connections between these and other agencies concerned with moral welfare, including social purity organisations, church bodies and social purity organisations. For example, the outdoor worker from the National Vigilance Association (Eastern Division) in Scotland patrolled outside the barracks in Edinburgh during the war years in order to prevent soldiers from being 'molested by women', reflecting concern about 'the threat of amateur prostitutes' (Own author, 1995 p. 27). In 1919, the agency raised funds to pay for the salaries of the first two women police officers in Edinburgh, in order to make a case to the council authorities for the establishment of women police in the city, on the grounds that women were needed to do preventive, 'caring' work, especially where this related to women and children (Own Author, 1995). This organisation, which began in 1911, was part of a worldwide movement whose aim was to protect women and girls 'against outrage, abduction and

prostitution, and the terrible wickedness and cruelty of the White Slave Trade' (Own author, 1995 p. 13). It later went on to become a professional social work agency providing a casework service to women and girls, as well as residential care, adoption and fostering services for children, thus demonstrating a direct connection between vigilance/purity/moral welfare work and social work.

In reviewing the work of the women patrols and women police, Woollacott (1994a) wryly observes that there was a parallel between the women on surveillance and the young women they sought to control: '.. they were both out after dark, roaming the streets, both enjoying a certain new, wartime freedom and imbibing the excitement of the times' (p. 336). They could feel they were doing their bit for victory, and at same time, they were 'pushing back the socially-prescribed limits on their own behaviour' (ib.id). Women patrols and women police were therefore not simply the arm of a powerful elite; they were, she suggests, 'women seeking public roles in a patriarchal order' (p. 337). They believed that they were working for the protection and benefit of the women they disciplined; 'they did work in the interest and for the welfare of young, working-class women' (p. 339). Yet 'protection' came with a particular, middle-class set of ideas about respectability and sex. Moreover, the concept of 'moral danger' was used almost solely to refer to the behaviour of young women. While boys and young men had always been free to 'sow their wild oats' and express themselves sexually, the sexual double standard meant that such behaviour from girls was not considered to be acceptable (Hudson, 1989). Most of the 'khaki fever' literature focused on girls, although occasionally newspaper articles also mentioned risk to boys. This echoes the notorious Labouchere amendment to the Criminal Law (Amendment) Act of 1885. While the main clauses of the act concerned prostitution and the age of sexual consent, this additional clause outlawed sex between men in private and public, demonstrating the notion that boys needed to be protected from the sexual advances of older, gay men (Smith 1976).

Cox (2003) points out that the numbers of young women arrested during the 'khaki fever epidemic' remained 'remarkably stable', given the intensive surveillance operated by the women's patrols and others (p.56). This was partly because the patrols did not have powers of arrest, and police officers were often loathe to intervene with what might have been courting couples who were not up to any harm! The aim of the patrols had always been diversion rather than prosecution; they hoped 'to divert young women from potentially immoral lifestyles', by offering words of warning and trying to get them to accompany them to single-sex and mixed youth clubs (ib.id.). 'Khaki fever' was, in Cox's view, 'founded on reports of drunkenness and debauchery that were greatly exaggerated' (ib.id.), as inquiries such as a Commission of Enquiry into the Conduct of War Workers in 1918 demonstrated. Similarly, when a NUWW patrol committee carried out observations of the Woolwich Arsenal in 1917, it found that most workers hurried back to their accommodation after work; given that munitions workers were working shifts of at least 12-hours, this is hardly surprising. The committee concluded that patrols were not, in fact, needed.

Again, the US example offers further insight. After entering the war in 1917, the federal government in the US instituted an 'anti-vice' programme, entitled the Commission on Training Camp Activities. This established a number of sub-agencies, one of which was the Committee on Protective Work for Girls (CPWG). A high profile social worker, Maude E. Miner, who had already published three books on probation work with women and girls and one on prostitution (1916), was appointed to direct this work. The CPWG sent lecturers to cities across the US to educate audiences on the dangers of unmarried sex, and, at the same time, employed 'field agents' to organise 'protective bureaus' in locations near military training camps and embarkation centres. Most of the 150 protective officers who worked for the CPWG were employees of local social work agencies and private

protection agencies. Their duties involved a mix of patrolling and 'personal work' with teenage girls and women, including home visits, counselling and referrals to social work agencies and girls' clubs (Appier, 1998: 44). But as police forces began to employ their own women police officers, the CPWG did not survive as a separate institution. By 1918, Miner had resigned, unhappy with the direction the agency was moving in. As she said, "Too often girls are placed under arrest and the men who have caused their delinquency are allowed to go free" (quoted in Appier, 1998, p.50). What we see being played out here is a key tension within social work – about care and control; welfare and policing.

This leads to the third set of questions, about the consequences of 'khaki fever' and its control.

What were the consequences and for whom?

It is clear that the consequences of the 'khaki fever' episode were both positive and negative, for the working-class women who were the main targets of surveillance, and for the middle-class women who conducted the patrols. On the positive side, some young women were befriended; others were protected from sexual assault. Some were given safe accommodation; many took advantage of the youth groups that were set up. 'Khaki fever', at the same time, opened up a new career path for middle-class women. Some became (unpaid) moral welfare workers and social workers while others secured new paid positions as women police officers and were gradually employed by local authorities across the UK and the US, albeit with different conditions of service to their male colleagues and distinct (gendered) duties.

But there was another, less positive, side to this morality tale. Woollacott asserts that the middle-class feminists who carved out new opportunities for themselves in society wanted women to behave 'in a way that was consonant with the qualities of

piety, chastity and sobriety, in other words, middle-class respectability' and they expected deference for their age and class (1994a, p.340). Jackson (2006) agrees. She suggests that our social work forebears did not challenge the hegemonic ideas about masculine and feminine values, but instead reinforced them, by invoking 'the very difference they sought to deny' in order to prevent women's exclusion (p.20). She explains:

'Those who supported women's involvement in patrolling and 'policing' during the First World War sought to make the streets safe places for 'vulnerable' women and children, but they also exhibited a desire for moral and sexual regulation that threatened other women's freedom' (p. 18-19).

In a similar vein, Cox (2003) is highly critical of what happened in the name of protection at this time. She argues that as the twentieth century unfolded, the policing of girls moved from the private to the public sector, with the growing use of care and protection charges and later care orders, and the expansion of local authority social services, children's homes and girls' borstals (p. 78). Treating girls in this way, she continues, should not be considered as a form of leniency, because:

'regulation at the margins of the law was regulation without rights ... the right for care and protection could be extended in ways that seriously compromised other girls' social and sexual freedoms even though it was extended in the name of liberalism' (p. 79).

The story of 'khaki fever' was fundamentally about care and control: the women patrolling the streets controlled through care, and cared through control; their justification was the 'moral danger' that the girls and young women were in. Moral danger has been at the roots of much care and control of women and girls over the centuries, demonstrated in the incarceration of young women in Magdalene asylums in the nineteenth century (Mahood, 1990) and in the large-scale removal of

Aboriginal girls from their families in Australia between 1900 and 1940 (White, 1999). It was also central to the 1968 Social Work (Scotland) Act's delineation of the conditions governing children in need of compulsory measures of care, later ratified in Section 52(2) of the Children (Scotland) Act 1995 (Pierson 2011). Section 32 of the 1968 Act states: 'through lack of parental care he is falling into bad associations or is exposed to moral danger', where 'he' was almost always interpreted, in practice, as 'she'. Moral danger is still a fundamental (although perhaps less visible) part of social work today: as social workers seek to act 'in the best interests of the child', as we set out to protect young people, when do our moralising judgements reinforce sexual double standards, and take away young people's agency and civil rights? These are not hypothetical questions for social workers. We work within a framework of legislation, policy and professional standards. But we also work within a societal context, one that (as this example shows clearly) exhibits very gendered and classist ideas about children and young people and about sex.

Discussion

So what messages does 'khaki fever' have for social work today? Burnham (2011) is critical of the 'selective historiography' of social work history, which has meant that some stories have been told and retold, while others have vanished from history. He has sought to reclaim poor law history, and especially the role of relieving officers; meanwhile, Lorenz (2008) has explored social pedagogy's historical roots. My own view, expressed in much of my writing over the last twenty years or so, is that social work must be brave enough to 'own' its compromised and compromising past. If it is to be a mature profession, it needs to be able to accept the uncomfortable truths and very real contradictions that are at its core. The 'khaki fever' case-study example offers one vehicle for doing this.

The first uncomfortable truth and real contradiction is that 'khaki fever' was, in the main, an invention. While the concerns were real, the reaction to them was out of all proportion to the risks that were posed. It was, in this sense, a classic example of a moral panic, as outlined by Cohen (a former social worker) in his classic study of moral panic around Mods and Rockers in England in the 1960s. Cohen (2002) stressed that, 'The argument is not that there is "nothing there" ... but that the reaction to what is observed or inferred is fundamentally inappropriate' (p. 172). Young developed this in his later writing, where he argues that moral panics are not, 'simply panics, media generated or otherwise that provide false information' (2009 p. 13). Rather, moral panics take personal anxiety to a societal level; they do not occur when political and social structures are solid and successful, but rather, when they are in crisis, 'when society's tectonic plates are shifting' (ib.id.).

'Khaki fever', emerging as it did during the major social and political upheaval of the beginnings of the First World War, demonstrates this well. It was something of great social concern, which erupted quickly and died down again just as rapidly. There was widespread agreement amongst politicians, the media and agencies (statutory and voluntary) that something needed to be done; the social reaction was, with little doubt, disproportionate to the threat that it contained. But 'khaki fever' was not, in practice, a wholly new moral panic. On the contrary, there had been clear evidence of panic about young women and sex at the end of the eighteenth century (Carter, 2014), evident in recurring stories about 'scarlet fever' (the allure of men in red uniforms!) in newspapers, novels (for example, *Pride and Prejudice*, by Jane Austen) and plays. The policing of girls and young women in the name of protection is then visible again at points throughout the nineteenth century, as witnessed in the battles for and against the Contagious Diseases Acts in the 1860s, and in the campaign to raise the age of sexual consent in the 1880s (own author, 1995; own author et al, 2012). In the early years of the twentieth century, a worldwide campaign against

'white slavery' again focused on young women's sexual behaviour, this time led by the National Vigilance Association (ib.id.). After the First World War, concerns about the outrageous behaviour of 'flappers' (independent young women with short hair and skirts) preoccupied the popular press, and by the Second World War, 'khaki fever' was replaced with a new story about women having 'inappropriate relationships' with American GIs, many of whom were said to be black, adding a further, racist dimension to the panic. In the 1960s and 1970s, concerns focused on women in mini-skirts and on 'free love' and on the behaviour of 'groupies'; more recently, girls drinking alcohol and 'ladette culture' have seized the headlines and the moral high ground (see Jackson and Tinkler, 2007). These examples demonstrate that while 'khaki fever' might have been one peak of concern, it was a familiar problem, rehearsed on a number of occasions, before and since. In this sense, it might be better described as an instance of moral regulation, rather than moral panic, as Hunt (1999) elaborates. He makes connections between 'multiple intersecting instances of moral regulation across time' (p3), arguing that moral regulation movements provide 'classic instances' of the link between 'the governance of others' and 'the governance of the self' (Foucault 1989). From this perspective, the moral entrepreneurs who patrolled the streets and public parks were setting standards of sexual behaviour for all women and men, not just for the girls and young women whom they 'befriended'.

This leads to the second uncomfortable truth and real contradiction in this story, and that is, the part played by women and feminism in the creation and maintenance of this discourse. It has already been stated that the targets of 'khaki fever' were, on the whole, working-class girls; the women patrols/police were largely made up of middle-class women, many of whom saw themselves as feminists, whose mission was to 'raise' the standards of sexual behaviour of the girls with whom they were working. This might, in itself, be viewed as problematic; as a kind of cultural imperialism where

one social class sought to impose its own values on another. However, Woollacott (1994b) argues that 'khaki fever' did not only address working-class girls; there were also growing fears about immorality increasing amongst the 'respectable' classes as well. Fears about young women's behaviour had been present prior to the war, in part a reaction to the threat of change should women be given the vote. The battle for the vote had been at its most popular and most militant in the years before the war; 50 to 60,000 women took part in a procession in London in 1911, when middle-class and working-class suffragettes and suffragists stood side-by-side demanding change (Dyhouse, 2014). Social unrest was also being expressed in other ways too, for example, as questions were being asked about female pleasure, homosexuality and birth control (for married women at least). Hence 'khaki fever' exacerbated fears that were already in widespread circulation. As Woollacott (1994b) writes: 'Because women's experience of war opened up a temporary liminal gender space between normal expectations of feminine and masculine behaviour, it posed a threat to the hegemonic gender order of peacetime' (p.10). More than this, gender was 'disrupted, constructed and reconstructed during war' (p.13). We need seek no further evidence for this than women's participation in the war effort. An additional 500,000 women joined the workforce during the First World War (Braybon, 1981; Braybon and Summerfield, 1987). While working-class women had always worked, the kind of jobs that they took on were very different during the war years; it is estimated that over 200,000 women who went into industry (munitions factories, engineering works, transport etc.) came from domestic service. They did not get equal pay although they were doing what had traditionally been men's work, and their conditions of service were constrained and sometimes dangerous. Nevertheless, they had more freedom and more disposable income that they had ever known before; their general health also improved, thanks to the provision of work canteens and lodgings. Middle-class women also found work outside the home during the war years, as a range of new positions (unpaid and paid) opened up as women as police, factory inspectors,

welfare supervisors and reform association workers, as well as in military service, as clerical officers, nurses and ambulance drivers (Noakes 2005). What this suggests is that the First World War allowed women from both working-class and middle-class backgrounds to make huge strides in terms of their independence and autonomy. The irony, however, is that it was middle-class women who sought to control the new freedoms experienced by working-class women; in doing so, they constrained the lives of all women.

The third and final uncomfortable truth and clear contradiction is, returning to Foucault (1972), that care and control in social work are not in opposition to one another but instead must be understood as two sides of one coin, integral to social work's way of being. This is demonstrated today in a new set of anxieties that has emerged about young people and sex, coined by the term, 'child sexual exploitation', or 'CSE'. A series of quasi-official reports and studies (Brock 2014; Coffey 2014; Jay 2014; Ofsted 2014) has highlighted the risks to children and young people of 'grooming', 'trafficking' and sexual abuse; meanwhile new organisations (especially the Child Exploitation Online Protection agency, CEOP) and old ones (children's charities such as Barnardo's and the National Society for Prevention of Cruelty to Children, NSPCC) compete for control of this ever-growing agenda (Own author, forthcoming 2015). My contention is that CSE may be argued to be a 21st century manifestation of 'khaki fever': like 'khaki fever', it is fundamentally a concern about young women having sex, and like 'khaki fever', its control may have unforeseen consequences. Whether we treat girls and young women as threats (as in the 'khaki fever' example) or as victims (as in CSE), the outcome is often the same. Their behaviour is likely to be placed under increased scrutiny in both situations; at the same time, the discourse of moral policing reinforces messages of female passivity and male aggression that make it difficult for all people, girls and boys/women and men alike, to negotiate the minefield that is sexual relations. This is not, of course, to

condone abuse or minimise harm. Just as some young women were in need of protection during the First World War, so social work has a duty today to protect those who are vulnerable, including, and perhaps especially, children. But how do we do this in ways that empower, rather than victimise? This remains a key question for social work today.

It is not accidental that the worries about CSE have emerged at a time when there is widespread public concern about sex. This is demonstrated daily in stories of historical sexual abuse, of pornography, of the sexualisation of children, of the 'dark net'. Burman (2014) argues that there has been a messy conflation between girls' and young women's vulnerability, risk, protection and control. It seems likely that current concerns will lead to more scrutiny and more social regulation of young women in the future, including those young women who become pregnant and those whose sexual partners are considered to be a problem (for example, in situations where domestic abuse or illicit drug-taking is suspected). In other words, as care increases, so does control, as we have seen throughout this case-study example.

Conclusion

Reviewing the story as a whole, I have argued that 'khaki fever', rather than being an isolated moral panic that flared up for a time and then died, was, in reality, part of a larger programme of moral regulation that began at least in the nineteenth century, and has continued to the present day. As social workers, we are part of this; we draw difficult issues to the attention of others and strive to protect and support the vulnerable: that is, after all, our job!. But in doing so, we can, at times, find ourselves implicated in deeply conservative ideas about women and men, about children and young people, and there are powerful tensions between the care/control and control/care aspects of the social work task. A historical approach encourages us to take a step back to ask: what else is going on here? What are the consequences of

our beliefs and actions likely to be - positive and negative - and for whom? In the end, the 'khaki fever' case-study example encourages us to be more cautious the next time we decide to 'take the moral high-ground'. It also reminds us that social work's impulse to care is always connected with its urge to control; this reality demands both honesty and self-reflexivity.

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¹ The NUWW was renamed the National Council of Women, or NCW, in 1919; meanwhile the WPS re-launched as the Women's Auxiliary Service in 1921.

² These were the Female Mission to the Fallen, the West London Mission, the Women Police, the Charing Cross Association and the Female Aid Society, alongside the Church Army, the Ladies Association, the Workhouse Girls' Aid Association and the Society for the Protection of Females (Cox 2003).